

Attorney Docket No.: TLME-99-001.3.US (CON)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

-						
I hereby certify to bearing First Cla of deposit.	ss Postage and addressed to the	scribed document is being Commissioner for Patents I	deposited with the United States Postal P.O. Box 1450, Alexandria, VA 22313-1	Service in an envelope 450, on the below date		
Date of Deposit: 06/	Name of Person Making the Deposit:	SAVANAH MENDOZA	Signature of the Person Making the Deposit:	nesmendop		
In re Applica	ion of: PARTOVI, Hadi; e	t ál.		RECEIVED		
Application	No.: 09/513,236	E	Examiner: NGUYEN, Quang N.	JUL 0 6 2004		
Filed: 02/24/00			art Unit: 2141			
Confirmation	No.: 6204			Technology Center 2100		
	D AND APPARATUS FO PERSONALIZATION	R CONTENT PERSO	DNALIZATION OVER A TELEF	PHONE INTERFACE WITH		
P.O. Box 14						
Alexandria,	/A 22313-1450	AMENDMENT :	TRANSMITTAL			
1. Trar	smitted herewith is an an	nendment for this app	olication			
(sheets)	se to an office action sheets of substit	n for the above identified patenute ute formal drawings.	t application.		
2. App	icant is other than a small	entity		۶.		
		Extension o	f Term	٠,		
3. The	proceedings herein are fo	or a patent applicatio	n and the provisions of 37 C.F	.R. 1.136 apply.		
(a) [X]			e under 37 C.F.R. 1.136 umber of months checked belo	w:)		
	Extension [X] one mon [] two month [] three mon [] four month	th \$ s \$ ths \$	<u>ee</u> 110.00 420.00 950.00 1,480.00			
		<u> </u>	ee \$110.00			
If an addition	al extension of time is re	quired, please consid	ler this a petition therefor.			
(b) []		e for the possibility th	m is required. However, this on at applicant has inadvertently			
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	110.00 OP					

08/09/2004 01 FC:1251



Fee Calculation

4. The fee for claims (37 C.H.H. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)								
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total			
Total Claims	12	- 20 =	0	x \$18.00	\$0.00			
Independent Claims	2	- 3 =	0	x \$86.00	\$0.00			
Multiple Dependent Claim Fee (one or more, first added by this \$290.00 amendment)								
Total Fees								

PAYMENT OF FEES

JUL 0 6 2004

5. The full fee due in connection with this communication is provided as follows:

Technology Center 2100

- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.

 A duplicate copy of this authorization is enclosed.
- [X] A check in the amount of \$110.00
- [] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.
- [X] Customer No: 000041066

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060 Customer No: 000041066

Respectfully submitted,

Date: June 2 2004

Reg. No. 46,274